

AIRCRAFT INVENTORY FORM

CLIENT INFORMATION

NAME: _____ ATTENTION: _____
COMPANY: _____ PHONE: _____
ADDRESS #1: _____
ADDRESS #2: _____
CITY: _____ STATE: _____ ZIP CODE: _____
EMAIL: _____

AIRCRAFT DESCRIPTION

MANUFACTURER: _____ MODEL: _____
SERIAL #: _____ REG. #: _____ YEAR OF MFG.: _____

MAINTENANCE

AIRFRAME TOTAL TIME: _____ HOBBS TIME _____
NUMBER OF LANDINGS: _____ NUMBER CYCLES: _____
LOG BOOKS ORIGINAL (YES)(NO): _____
MAINTENANCE ANNUAL DATE: _____ PROGRESSIVE INSPECTION (YES)(NO): _____
TIME LIMITERS (YES)(NO): _____ CYCLE LIMITERS (YES)(NO): _____
LIMITERS – DESCRIBE _____
SERVICE BULLETINS: _____
AD'S COMPLIED WITH (YES)(NO): _____ ESTIMATED COST TO COMPLY: _____

DAMAGE HISTORY (YES)(NO): _____

CURRENT DAMAGE THAT HAS NOT BEEN REPAIRED (YES)(NO): _____

REQUIRED REPAIRS: _____

ESTIMATED COST OF REPAIR: _____

PREVIOUSLY REPAIRED DAMAGE

DAMAGE EVENT #1 DATE OF DAMAGE: _____ EXTENT OF DAMAGE: _____

REPAIRS: _____

DAMAGE EVENT #2 DATE OF DAMAGE: _____ EXTENT OF DAMAGE: _____

REPAIRS: _____

DAMAGE EVENT #3 DATE OF DAMAGE: _____ EXTENT OF DAMAGE: _____

REPAIRS: _____

AIRFRAME CONDITION

TIRES (GOOD)(AVERAGE)(POOR): _____ BRAKES (TYPE): _____

ANTI SKID (YES)(NO): _____

RE-PAINT DATE: _____ PAINTED BY: _____ COMMENTS: _____

PRESSURIZED CABIN (YES)(NO):

COMMENTS: _____

AIRFRAME MODIFICATIONS

#1 DATE: _____ MODIFICATION: _____

ORIGINAL COST OF MODIFICATION: _____

#2 DATE: _____ MODIFICATION: _____

ORIGINAL COST OF MODIFICATION: _____

#3 DATE: _____ MODIFICATION: _____

ORIGINAL COST OF MODIFICATION: _____

#4 DATE: _____ MODIFICATION: _____

ORIGINAL COST OF MODIFICATION: _____

#5 DATE: _____ MODIFICATION: _____

ORIGINAL COST OF MODIFICATION: _____

ENGINE AND PROPELLERS

TYPE ENGINE (PISTON)(PISTON TURBO)(PROP JET)(FAN JET)(TURBO JET): _____

#1 ENGINE MAKE: _____ **ENGINE MODEL #:** _____

ENGINE SERIAL NUMBER: _____ HOURS SINCE (NEW)(FACTORY REMAN)(O/H TO

FAA OVERHAUL SERVICE LIMITS)(FIELD O/H TO NEW ENGINE SERVICE LIMITS): _____

OVERHAULED BY: _____ COMMENTS: _____

#2 ENGINE MAKE: _____ **ENGINE MODEL #:** _____

ENGINE SERIAL NUMBER: _____ HOURS SINCE (NEW)(FACTORY REMAN)(O/H TO

FAA OVERHAUL SERVICE LIMITS)(FIELD O/H TO NEW ENGINE SERVICE LIMITS): _____

OVERHAULED BY: _____ COMMENTS: _____

ENGINE FIRE DETECTION SYSTEM (YES)(NO): ___ ENGINE FIRE BOTTLES (YES)(NO): ___

PROPELLERS (CONSTANT SPEED)(FIXED PITCH)(N/A): _ MFG RECOMMENDED TBO: ___

#1 PROPELLER MAKE: _____ **MODEL:** _____

SERIAL NUMBER: _____ NUMBER OF BLADES (2) (3): _____

#2 PROPELLER MAKE: _____ **MODEL:** _____

SERIAL NUMBER: _____ NUMBER OF BLADES (2) (3): _____

PROP REVERSERS (YES)(NO): _____ THRUST REVERSERS (YES)(NO): _____

ENGINE MODIFICATIONS

DATE: _____ MOD: _____ MOD ORIGINAL COST: _____

DATE: _____ MOD: _____ MOD ORIGINAL COST: _____

DATE: _____ MOD: _____ MOD ORIGINAL COST: _____

DATE: _____ MOD: _____ MOD ORIGINAL COST: _____
DATE: _____ MOD: _____ MOD ORIGINAL COST: _____
CURRENT KNOWN ENGINE MAINTENANCE ITEMS: _____

ESTIMATED COST TO REPAIR ENGINE MAINTENANCE ITEMS: _____
OVERALL ENGINE COMMENTS: _____

AVIONICS

ADF #1 MAKE: _____ MODEL: _____
ADF #2 MAKE: _____ MODEL: _____
ALTIMETER, ENCODING #1 MAKE: _____ MODEL: _____
ALTIMETER, ENCODING #2 MAKE: _____ MODEL: _____
ALTIMETER, RADIO/RADAR #1 MAKE: _____ MODEL: _____
ALTIMETER, RADIO/RADAR #2 MAKE: _____ MODEL: _____
AUDIO PANEL MAKE: _____ MODEL: _____
AUTOPILOT MAKE: _____ MODEL: _____
COMMUNICATIONS RADIO #1 MAKE: _____ MODEL: _____
COMMUNICATIONS RADIO #2 MAKE: _____ MODEL: _____
DME #1 MAKE: _____ MODEL: _____
DME #2 MAKE: _____ MODEL: _____
FLIGHT DIRECTOR #1 MAKE: _____ MODEL: _____
FLIGHT DIRECTOR #2 MAKE: _____ MODEL: _____
GLIDE SLOPE #1 MAKE: _____ MODEL: _____
GLIDE SLOPE #2 MAKE: _____ MODEL: _____
GPS MAKE: _____ MODEL: _____
HSI #1 MAKE: _____ MODEL: _____
HSI #2 MAKE: _____ MODEL: _____
LORAN MAKE: _____ MODEL: _____
MARKER BEACON MAKE: _____ MODEL: _____
MOVING MAP DISPLAY MAKE: _____ MODEL: _____
NAVIGATION RADIO #1 MAKE: _____ MODEL: _____
NAVIGATION RADIO #2 MAKE: _____ MODEL: _____
NAV/COM MAKE #1 MAKE: _____ MODEL: _____
NAV/COM MAKE #2 MAKE: _____ MODEL: _____
OMEGA MAKE: _____ MODEL: _____
RMI #1 MAKE: _____ MODEL: _____
RMI #2 MAKE: _____ MODEL: _____
RNAV MAKE: _____ MODEL: _____
STORMSCOPE MAKE: _____ MODEL: _____
TELEPHONE MAKE: _____ MODEL: _____
TRANSCIVERS (HR XCVR) MAKE: _____ MODEL: _____
TRANSPONDER #1 MAKE: _____ MODEL: _____
TRANSPONDER #2 MAKE: _____ MODEL: _____
VLF MAKE: _____ MODEL: _____
WEATHER RADAR MAKE: _____ MODEL: _____

INSTRUMENTATION

FULL PANEL PILOT'S SIDE (YES)(NO): _____

FULL PANEL COPILOT'S SIDE(YES)(NO): _____

ADDITIONAL EQUIPMENT

DUAL CONTROLS (YES)(NO): _____ TYPE (WHEEL)(STICK)(YOKE): _____

STALL WARNING (YES)(NO): _____ STICK SHAKER (YES)(NO): _____

STROBE LIGHTS (YES)(NO): _____ ROTATING BEACON (YES)(NO): _____

NAVIGATION LIGHTS (YES)(NO): _____ TAXI LIGHTS (YES)(NO): _____

LONG RANG FUEL/AUX TANKS (YES)(NO): _____ AUX FUEL QUANTITY: _____

SINGLE POINT REFUELING (YES)(NO): _____ TOILET (YES)(NO): _____

GALLEY (YES)(NO): _____ CABINetry (YES)(NO): _____

OTHER EQUIPMENT: _____

COMMENTS: _____

DE-ICE SYSTEMS.

KNOWN ICE SYSTEM (YES)(NO): _____ ICE LIGHTS (YES)(NO): _____

PROP DE-ICE (YES)(NO): _____ TYPE (ELECTRIC)(ALCOHOL): _____

WING/TAIL BOOTS (YES)(NO): _____

WINDSHIELD DE-ICE (YES)(NO): _____ WIPERS (LEFT)(BOTH): _____

JET INTAKE DE-ICE (YES)(NO): _____ PITOT HEAT (YES)(NO): _____

DOCUMENTATION:

Aircraft Registered to: _____

Address 1 _____

Address 1 _____

City, State, Zip _____

Aircraft Registration Date _____

Aircraft Registration EXPIRATION Date _____

Location of Registration and Airworthiness Certificate _____

Location of Pilot's Handbook _____

Location of Weight and Balance _____

Location of 337s and Equipment List _____

Transponder Certification Date _____

ELT Battery Expiration Date _____